



APPLICATION FOR PARTICIPATION

ONLINE VOTER REGISTRATION UNIQUE URL PILOT PROGRAM

NAME OF 501(C)(3) ORGANIZATION OR POLITICAL PARTY

501(C)(3) EIN OR AZSOS FILER ID #

E-MAIL ADDRESS

BUSINESS TELEPHONE

BUSINESS ADDRESS

CITY

STATE

ZIP CODE

PLEASE PROVIDE A BRIEF DESCRIPTION OF THE ORGANIZATION

PRIMARY REPRESENTATIVE CONTACT NAME

PRIMARY REPRESENTATIVE ROLE

E-MAIL ADDRESS

TELEPHONE NUMBER

MAILING ADDRESS

CITY

STATE

ZIP CODE

1. Please describe your organization's experience conducting voter registration drives during prior election cycles, including the approximate number of registration forms your organization submitted in 2016 and 2018.



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2. Please describe your voter registration plans for 2020, including: What resources do you have devoted to those efforts? What is your voter registration goal (number of completed registrations)? What percent of voter registrations do you hope to submit electronically via a unique URL in 2020?

3. If approved for the Pilot Project, how do you plan to utilize the unique URL assigned to your organization to maximize voter registrations completed through that URL?

4. Describe your current voter registration training for volunteers/paid canvassers and your quality assurance process.

I have read and will agree to the terms contained in the OVR Unique URL Pilot Program Participant Agreement if my application is approved, and understand that submission of this application does not guarantee my organization's participation in the Pilot Program.

By signing, I declare under penalty of perjury that the information provided on this form is true, complete, and correct.

/S/

Name of Authorized Representative

Conformed Signature of Authorized Representative